	Main Document 1 ag	C I 01 33	
Fill in this information to identify your case			
United States Bankruptcy Court for the:			
Central District of California			
Case number (#known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

P	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture	Darlene	
	identification (for example, your driver's license or	First name Denise	First name
	passport).	Middle name	Middle name
	Bring your picture identification to your meeting	Avila Last name	Last name
	with the trustee.		
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 6 0 7 8 OR 9 xx - xx	xxx - xx

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About Debtor 1:	About Dobtor 2 (Chause Calaine Line Line
	About Debtor 2 (Spouse Only in a Joint Case):
✓ I have not used any business names or EINs.	I have not used any business names or El Ns .
Business name	Business name
Business name	Business name
EIN	EIN
EIN	EIN
	If Debtor 2 lives at a different address:
2521 1/2 Ganahl St Number Street	Number Street
Los Angeles CA 90033	
City State ZIP Code Los Angeles County	City State ZIP Co
If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
Number Street	Number Street
P.O. Box	P.O. Box
City State ZIP Code	City State ZIP Cod
Check one:	Check one:
Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, have lived in this district longer than in any other district.
I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Business name Business name EIN EIN 2521 1/2 Ganahl St Number Street Los Angeles CA 90033 City State ZIP Code Los Angeles County County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street P.O. Box City State ZIP Code Check one: Check one:

P	art 2: Tell the Court A	bout Your B	ankruptcy Case				
7.	The chapter of the Bankruptcy Code you are choosing to file under	for Bank	<i>crupicy</i> (Form 2010)). Als pter 7 pter 11 pter 12			U.S.C. § 342(b) for Individuals Filing e appropriate box.	
8.	How you will pay the fe	loca your subr with I nee App By la less pay	I court for more details self, you may pay with mitting your payment of a pre-printed address and to pay the fee in in lication for Individuals quest that my fee be a aw, a judge may, but is than 150% of the office	a about how you a cash, cashier's on your behalf, you a stallments. If you to Pay The Filing waived (You may a not required to ital poverty line to). If you choose	may pay. Typically check, or money cour attorney may pour attorney may pour choose this option or request this option, waive your fee, a hat applies to your this option, you muthis option.	ack with the clerk's office in your by, if you are paying the fee order. If your attorney is beay with a credit card or check tion, sign and attach the sold of the control	
	Have you filed for bankruptcy within the last 8 years?	Distric	st		When	Case number Case number Case number	5 4
10.	affiliate?	S Yes. No Debtor Debtor			_ WhenRe	Relationship to you Case number, if known elationship to you Case number, if known	_;; _;;
11.	Do you rent your residence?	✓ No. Yes.	Go to line 12. Has your landlord obtain No. Go to line 12.	ned an eviction jud	gment against you?		
			Yes. Fill out Initial S this bankruptcy petit		Eviction Judgment	Against You (Form 101A) and file it with	

Р	art 3: Report About Any	Busines	ses You Own as a Sole Proprietor
12	. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a		Go to Part 4. S. Name and location of business
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if any
	LLC. If you have more than one sole proprietorship, use a separate sheet and attach it		Number Street
	to this petition.		City State ZIP Code
			Check the appropriate box to describe your business:
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as defined in 11 U.S.C. § 101(518))
			Commodify Broker (as defined in 11 U.S.C. § 101(6))
			None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business	most re	re filing under Chapter 11, the court must know whether you are a small business debtor so that it appropriate deadlines. If you indicate that you are a small business debtor, you must attach your cent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if hese documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
	e btor? or a definition of <i>small</i>	☑ No.	I am not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pa	rt 4: Report if You Own o	r Have	Any Hazardous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	✓ No	
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	Yes.	What is the hazard?
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building		
	that needs urgent repairs?		Where is the property?
			1.

s. Tell the court whether	About Debtor 1:		About Debtor 2 (S	pouse Only in a Joint Case):	
you have received a briefing about credit	You must check on	e:	You must check on	e:	
counseling. The law requires that you receive a briefing about credi	counseling age	lefing from an approved credit ency within the 180 days before I ruptcy petition, and I received a	☐ I received a briefing from an approved credit counseling agency within the 180 days before I filled this bankruptcy petition, and I received a certificate of completion.		
counseling before you file for bankruptcy, You must truthfully check one of the	Attach a copy o	ompletion. f the certificate and the payment t you developed with the agency.	Attach a copy of	ompletion. f the certificate and the payment t you developed with the agency.	
following choices. If you cannot do so, you are not eligible to file.	counseling age	iefing from an approved credit ency within the 180 days before I ruptcy petition, but I do not have a ompletion.	counseling ag	iefing from an approved credit ency within the 180 days before ! ruptcy petition, but I do not have a ompletion.	
If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paic, and your creditors can begin collection activities again.	Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.		Within 14 days after you file this bankruptcy petition you MUST file a copy of the certificate and paymer plan, if any.		
	services from a unable to obta days after I ma	asked for credit counseling an approved agency, but was in those services during the 7 ide my request, and exigent merit a 30-day temporary waiver ment.	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waive of the requirement.		
	requirement, att what efforts you you were unable	day temporary waiver of the tach a separate sheet explaining a made to obtain the briefing, why e to obtain it before you filed for dwhat exigent circumstances file this case.	requirement, at what efforts you you were unabl	day temporary waiver of the tach a separate sheet explaining a made to obtain the briefing, why e to obtain it before you filed for a what exigent circumstances file this case.	
	dissatisfied with	be dismissed if the court is nyour reasons for not receiving a you filed for bankruptcy.	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		
	still receive a br You must file a agency, along v	atisfied with your reasons, you must riefing within 30 days after you file. certificate from the approved with a copy of the payment plan you my. If you do not do so, your case ed,			
	Any extension of	ny extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15		of the 30-day deadline is granted and is limited to a maximum of 15	
		ed to receive a briefing about ing because of:		ed to receive a briefing about Ing because of:	
	Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
	Active duty	. I am currently on active military duty in a military combat zone.	Active duty	 I am currently on active military duty in a military combat zone. 	
	briefing about c	ou are not required to receive a redit counseling, you must file a er of credit counseling with the court.	briefing about c	ou are not required to receive a redit counseling, you must file a er of credit counseling with the court.	

Part 6: Answer These Que	stions for Reporting Purpose	s	
16. What kind of debts do you have?	as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril	primarily for a personal, family, or your personal primarily for a personal family, or your personal family, your personal family fa	debts are debts that you incurred to obtain of the business or investment.
17. Are you filling under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expenses	7. Do you estimate that after any	exempt property is excluded and le to distribute to unsecured creditors?
How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below			
For you	correct. If I have chosen to file under Chap of title 11, United States Code. I ur	oter 7, I am aware that I may proce	that the information provided is true and eed, if eligible, under Chapter 7, 11,12, or 13 er each chapter, and I choose to proceed
	under Chapter 7. If no attorney represents me and I this document, I have obtained and I request relief in accordance with	d read the notice required by 11 U	- ','
	with a bankruptcy case can result in 18 U.S.C. \$\\$ 152/1341, 1519, and	in fines up to \$250,000, or imprison 1 3571.	
9	Signature of Debtor 1 Executed on MM / DD /YYY	Exec	ature of Debtor 2 suted on MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

101 0	and a view and position is incorrect.				
	Date	09/04/2019			
Signature of Attorney for Debtor		MM / DD /YYYY	_		
Cynthia Grande					
Printed name					
Cynthia Grande Law Firm					
Firm name					
3812 Sepulveda Blvd.					
Number Street	<u> </u>		_		
220					
Torrance	CA	90505			
City	State	ZIP Code	_		
Contact phone 3107132334	Email address info@	thegrandelawfirm.com)		
266549	CA				
Bar number	State	_			

STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

- 1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property None
- 2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- 3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each still pending, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule None
- 4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B None

I declare, under penalty of perjury, that the fo	pregoing is true and correct.
Executed at Torrance , Califor	nia Signature of Debtor 1
Date: 09/04/2019	
	Signature of Debtor 2

-This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

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Debtor 1	arlene Denis	e Avila		
	Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First				
Opouse, it ining) First	Name	Middle Name	List Name	
Jnited States Bank	ruptcy Court for th	e: Central District of Ca	ılifornia	

Check	c if	this	is	ar
amen	de	d filii	าต	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets Your assets 1. Schedule A/B: Property (Official Form 106A/B) Value of what you own 1a. Copy line 55, Total real estate, from Schedule A/B..... \$240,717.00 1b. Copy line 62, Total personal property, from Schedule A/B..... \$15,690.00 1c. Copy line 63, Total of all property on Schedule A/B..... \$256,407,00 Part 2: Summarize Your Liabilities Your liabilities 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Amount you owe 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D...... \$365,296.27 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... \$0.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$21,798.00 Your total liabilities \$387,094.27 Part 3: Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I..... \$4,820.12 5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J.... \$3,887,84

Case 2:19-bk-20479-SK Doc 1 Filed 09/04/19 Entered 09/04/19 18:05:15 Darlene Denise Avila Main Document Page 10 of 55 Debtor 1 First Name Middle Name Case number (if known) Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 2,520.03 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 0.00 9d, Student loans. (Copy line 6f.) 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) 0.00 9g. Total. Add lines 9a through 9f. 0.00

Fill in this information to identify your case and the	rs 1 Filed 09/04/19 Entered 09/ Still Document Page 11 of 55	04/19 18:05:15	Desc
Debtor 1 Darlene Denise Avila			
First Name Middle Name Debtor 2	Last Name		
(Spouse, if filling) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Central District of Cal	ifornia		
Case number		г	70
		L	☐ Check if this is an amended filing
Official Form 106A/B			
Schedule A/B: Propert			12/15
In each category, separately list and describe item category where you think it fits best. Be as compl responsible for supplying correct information. If m write your name and case number (if known). Answer 1: Describe Each Residence, Building	ete and accurate as possible. If two married peopl nore space is needed, attach a separate sheet to the wer every question.	e are filing together, bo ils form. On the top of a	oth are equally
1. Do you own or have any legal or equitable interes	est in any residence, bullding, land, or similar prop	erty?	
No. Go to Part 2.			
Yes. Where is the property?	What is the property? Check all that apply. Single-family home	Do not deduct secured cla	
1.1. 2521 1/2 Ganahl St Street address, if available, or other description	- Duplex or multi-unit building	the amount of any secure Creditors Who Have Clar	
	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land		\$ 240,717.00
Los Angeles CA 90033	☐ Investment property ☐ Timeshare	Describe the nature	of your ownership
City State ZIP Code	Other	interest (such as fee the entiretles, or a lif	
	Who has an Interest in the property? Check one.	Joint tenant	
Los Angeles County	Debtor 1 only	Check if this is co	mmunity property
County	Debtor 2 only Debtor 1 and Debtor 2 only		
	At least one of the debtors and another		
Dek	Other information you wish to add about this it property identification number: otor has a half interest in the property, Debtor father h		
If you own or have more than one, list here:	What is the property? Check all that apply.	Do not deduct secured cla	ime or exemptions. Put
1.2.	Single-family home Duplex or multi-unit building	the amount of any secure- Creditors Who Have Claim	d claims on Schedule D
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
×=====================================	Land Investment property	\$	\$
City State ZIP Code	Timeshare	Describe the nature of	f your ownership
_	Who has an interest in the prepart 2 Charles	interest (such as fee s the entiretles, or a life	
	Who has an interest in the property? Check one. Debtor 1 only		
County	Debtor 2 only		
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co	mmunity property
		,	
	Other Information you wish to add about this ite property identification number:	m, such as local	

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Street address, if available, or other description City State ZIP Code	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	the amount of any secucined to the control of the c	claims or exemptions Put red claims on Schedule D lains Secured by Property Current value of the portion you own? \$
County	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this it property identification number:	Check if this is a (see instructions)	fe estate), if known.
Add the dollar value of the portion you own for a you have attached for Part 1. Write that number I Part 2: Describe Your Vehicles			\$240,717.00
you own that someone else drives. If you lease a vehicle 3. Cars, vans, trucks, tractors, sport utility vehicles. No Yes	, motorcycles	Shorphou Loades.	
3.1. Make: Nissan Mcdel: Altima Year: 2008 Approximate mileage: 116000 Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured obtate amount of any secure Creditors Who Have Class Current value of the entire property?	d claims on Schedule D
Condition: Fair If you own or have more than one, describe here:	Check if this is community property (see instructions)	\$3,300.00	\$3,300.00
Year:	Who has an Interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the emount of any secured Creditors Who Have Claus Current value of the entire property?	claims on Schedule D
Other information:	Check if this is community property (see instructions)	\$	\$

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Make: Model:		Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schodul
Year:	Debtor 1 and Debtor 2 only	Current value of the	
Approximate mileage: Cther information:	At least one of the debtors and another	entire property?	portion you ow
outer information.	Check if this is community property (see instructions)	\$	\$
Make:		Do not deduct secured of the amount of any secure	ed claims on Schedun
Year: Approximate mileage:	Debtor 2 only	Creditors Who Have Clar Current value of the entire property?	
Other information:	Check if this is community property (see instructions)	\$	\$
amples: Boats, trailers, motors, persor No Yes Make: Model:	Debtor 1 only	po net deduct secured cla the amount of any secured Creditors Who Have Claim	claims on Schedule
amples: Boats, trailers, motors, persor No Yes Make:	mal watercraft, fishing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one.	Do not deduct secured cla	d claims on Schedule as Secured by Proper Current value of
amples: Boats, trailers, motors, persor No Yes Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	d claims on Schedule as Sacured by Prope Current value of portion you own
Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d clams on Schedule as Secured by Prope Current value of portion you own \$
Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this is community property (see instructions) e: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule is Secured by Proper Current value of portion you own \$
mples: Boats, trailers, motors, persor No Yes Make: Model: Year: Other information: u own or have more than one, list her Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this is community property (see instructions) e: Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	Current value of portion you own
Amples: Boats, trailers, motors, persor No Yes Make: Model: Year: Other information: u own or have more than one, list her Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this Is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$	d claims on Schedule is Secured by Proper Current value of portion you own \$

Part 3: Describe Your Personal and Household Items

v. Duusennia annae am	legal or equitable interest in any of the following items?	Current value of the portion you own?
6. Household goods and	1 furnishings	Do not deduct secured clair
Examples: Major applia	ances, furniture, linens, china, kitchenware	or exemptions
☐ No ☑ Yes, Describe	1 Bedroom Set, Couch, 3 small drawers, Coffee Table, Dining Table with 8 Chairs, 3 Lamps, TV Stand, Bunk Bed, Refrigerator	
7. Electronics		\$ 2,500.00
	and radian and the latest and the la	1
□ No	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games	 /
☑Yes. Describe		_{\$} 200.00
8. Collectibles of value		
Examples: Antiques and stamp, coin, No	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	
Yes. Describe		\$ 0.00
Equipment for sports a	nd hobbies	_ φ
Examples: Sports, photo	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments	
☑ No		3
Yes. Describe		\$ 0.00
). Firearms		
Examples: Pistols, rifles,	shotguns, ammunition, and related equipment	J
res. Describe		\$ 0.00
. Clothes		
□ 140	les, furs, leather coats, designer wear, shoes, accessories Clothes, Shoes, 3 Purses, Belts, Hats, Sweaters and Jackets	
Yes. Describe	Sacrets and Sacrets	s 500.00
Jewelry		-
_	ry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
□ No □	arrings	s 150.00
Yes. Describe		\$_100.00
/_ Non-farm animals		
Examples: Dogs, cats, bird	s, horses	
Non-farm animals Examples: Dogs, cats, bird D		_{\$} 0.00
Non-farm animals Examples: Dogs, cats, bird No Yes. Describe		§ 0.00
Non-farm animals Examples: Dogs, cats, bird No Yes. Describe Any other personal and he		<u>\$</u> 0.00
Non-farm animals Examples: Dogs, cats, bird No Yes. Describe	ousehold items you did not already list, including any health aids you did not list	\$ 0.00 \$ 0.00

Do you own or have any leg	al or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions
16. Cash <i>Examples:</i> Money you hav	e in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
☐ No		
☑ Yes	Cash:	<u>\$ 40.00</u>
	ngs, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, ar institutions. If you have multiple accounts with the same institution, list each.	
☐ No ☑ Yes	Institution name:	
17.1. Checking account:	Wells Fargo Bank	_{\$} 300.00
17.2. Checking account:		
17.3. Savings account:		
17,4, Savings account:		
_		
		- \$
8. Bonds, mutual funds, or p Examples: Bond funds, invo No Yes Institution or issuer name:	bublicly traded stocks estment accounts with brokerage firms, money market accounts	\$
		\$
		\$
an LLC, partnership, and ✓ No Yes. Give specific information about	k and Interests in incorporated and unincorporated businesses, including an interest in joint venture	
them Name of entity:	% of ownership:	
		\$
		\$
		, \$

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20. Government and corporate bonds and other negotiable and non-negotiab	la instrumente
Negotiable instruments include personal charks, cochiers' about	
and the control of th	ng or delivering them.
₩ No	
Yes. Give specific information about	
them.	
Issuer name:	
	\$
	\$
21. Retirement or pension accounts	
Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings account	ts, or other pension or profit-sharing plans
L_I No	
✓ Yes. List each account separately. Institution name:	
Type of account:	
401(k) or similar plan: 401(k)	
to the second plant.	\$8,700.00
Pension plan:	<u> </u>
ID A.	——————————————————————————————————————
Retirement account:	
neurement account:	\$
Keogh:	
4 A	
Additional account:	\$
Additional account:	\$
Your share of all unused deposits you have made so that you may continue servie Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, vecompanies, or others	ce or use from a company water), telecommunications
☑ No	
Yes Institution name or individual:	
ectric:	\$
s:	
ating oil:	
	\$
ntal unit:	\$
paid rent;	
ephone:	9
iter:	
a da la	
er:	
	\$
Annuities (A contract for a periodic payment of money to you, either for life or for a	number of years)
✓ No	member of years)
Yes Issuer name and description:	
	\$
	_
	\$

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	ider a qualified state tuition p	
Yes		
Institution name and description. Separately file the re	ecords of any interests.11 U.S.C	S. § 521(c):
		\$
		\$
25. Trusts, equitable or tubus in		\$ <u></u>
25. Trusts, equitable or future interests in property (other than anything listed in line exercisable for your benefit	e 1), and rights or nowers	
₽ No		
Yes. Give specific		
information about them		
6 Patenta annui I		\$ <u>0.00</u>
6. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, area.		
Examples: Internet domain names, websites, proceeds from royalties and licensing agr	reements	
Yes. Give specific		
information about them		
i		\$0.00
Licenses, franchises, and other general intangibles		4
The standing permits, exclusive licenses, cooperative according to the		
No No	licenses, professional licenses	
Yes. Give specific		
information about them		
		\$0.00
ney or property owed to you?		
		Current value of th
		portion you own? Do not deduct secured
ax refunds owed to you		claims or exemptions
☑ No		
Yes. Give specific information about them, including whether		
about them, including whether	Federal:	\$ 0.00
you already filed the returns	State:	\$ 0.00
you already filed the returns and the tax years.		\$ 0.00
you already filed the returns	Local:	
and the tax years	Local:	*
and the tax years		
and the tax years		
and the tax years		
and the tax years	orce settlement, property settle	
and the tax years		
and the tax years	orce settlement, property settle	ment
and the tax years	/orce settlement, property settle	ment \$ 0.00
and the tax years	/orce settlement, property settle Alimony: Maintenance:	\$ 0.00 \$ 0.00
and the tax years	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
and the tax years	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
and the tax years	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
and the tax years	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
and the tax years	Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00

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Yes. Name the insurance c of each policy and list	company Company name:	Beneficiary:	Surrender or refund value
			.
			\$
			\$
property because someone has	Is due you from someone who has died ving trust, expect proceeds from a life insurant sided.	nce policy, or are currently entitled to receive	· ·
☑ No			
Yes. Give specific information	on		
			\$ <u>0.00</u>
3. Claims against third parties, w	whether or not you have filed a lawsuit or r	made a demand for payment	
No No	ent disputes, insurance claims, or rights to sur	е	
Yes. Describe each claim			_
			s 0.00
Other contingent and unliquida	ated claims of every nature, including cou	Interclaims of the debtor and rights	
V No		of the deptor and rights	
Yes. Describe each claim			
			_{\$} 0.00
			3
Any financial assets you did no	ot already list		
☑ No			·
Yes. Give specific information	1		
			\$ 0.00
			
Add the dollar value of all of yo	our entries from Part 4, including any entrie	95 IOI hadee you have other bad	1
Add the dollar value of all of yo for Part 4. Write that number he	eur entries from Part 4, including any entrie	es for pages you have attached	9,040.00
. Add the dollar value of all of yo for Part 4. Write that number he	err entries from Part 4, including any entrie	es for pages you have attached	\$ 9,040.00
. Add the dollar value of all of yo for Part 4. Write that number he	eur entries from Part 4, including any entri	es for pages you have attached	\$9,040.00
	70	→	<u> </u>
ort 5: Describe Any Busi	iness-Related Property You Own	or Have an Interest In. List any	<u> </u>
ort 5: Describe Any Busi	70	or Have an Interest In. List any	<u> </u>
Describe Any Busi Do you own or have any legal or No. Gc to Part 6.	iness-Related Property You Own	or Have an Interest In. List any	<u> </u>
rt 5: Describe Any Busi	iness-Related Property You Own	or Have an Interest In. List any	<u> </u>
rt 5: Describe Any Busi Do you own or have any legal or ☑ No. Gc to Part 6.	iness-Related Property You Own	or Have an Interest In. List any	real estate in Part 1.
rt 5: Describe Any Busi Do you own or have any legal or ☑ No. Gc to Part 6.	iness-Related Property You Own	or Have an Interest In. List any	real estate in Part 1. Current value of the portion you own?
rt 5: Describe Any Busi Do you own or have any legal or ☑ No. Gc to Part 6. ☑ Yes. Go to line 38.	iness-Related Property You Own	or Have an Interest In. List any	real estate in Part 1.
rt 5: Describe Any Busi Do you own or have any legal or ☑ No. Gc to Part 6.	iness-Related Property You Own	or Have an Interest In. List any	Current value of the portion you own?
Describe Any Busing Do you own or have any legal or No. Gc to Part 6. Yes. Go to line 38.	iness-Related Property You Own	or Have an Interest In. List any	Current value of the portion you own?
rt 5: Describe Any Busi Do you own or have any legal or No. Gc to Part 6. Yes. Go to line 38. Accounts receivable or commiss No Yes. Describe	iness-Related Property You Own requitable interest in any business-related	or Have an Interest In. List any	Current value of the portion you own?
Describe Any Busino Do you own or have any legal or No. Gc to Part 6. Yes. Go to line 38. Accounts receivable or commiss No Yes. Describe	iness-Related Property You Own requitable interest in any business-related sions you already earned	or Have an Interest In. List any	Current value of the portion you own? Do not deduct secured claims or exemptions.
Describe Any Businos Do you own or have any legal or No. Gc to Part 6. Yes. Go to line 38. Accounts receivable or commiss No Yes. Describe	iness-Related Property You Own requitable interest in any business-related sions you already earned	or Have an Interest In. List any	Current value of the portion you own? Do not deduct secured cleans or exemptions.
Describe Any Busi Do you own or have any legal or No. Gc to Part 6. Yes. Go to line 38. Accounts receivable or commiss No Yes. Describe	iness-Related Property You Own requitable interest in any business-related	or Have an Interest In. List any	Current value of the portion you own? Do not deduct secured claims or exemptions.

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40 Blackings, Sixtures agriculture		
40. Machinery, fixtures, equipment, supplies you use In business, and tools of	your trade	
☐ No ☐ Yes. Describe		
Tes. Describe		s
41. Inventory		
No No		
Yes. Describe		\$
42. Interests in partnerships or joint ventures		
No □		
Yes. Describe Name of entity:	% of ownershi	n:
	%	
		\$ \$
	%	\$
43. Customer lists, mailing lists, or other compilations		
□ No		
Yes. Do your lists include personally identifiable information (as defined	in 11 U.S.C. 8 101///14/2	
1 (No		
Yes. Describe		
		\$
44. Any business-related property you did not already list		
No		
Yes. Give specific		
information		\$
		\$
		\$
		\$
		\$
		φ
		3
45. Add the dollar value of all of your entries from Part 5, including any entries for Part 5. Write that number here	or pages you have attached	\$ 0.00
Part 6: Describe Any Farm- and Commercial Fishing-Related Proper	TV VOIL Own or Have an Internal	1_
If you own or have an interest in farmland, list it in Part 1.	ty 700 0wil of flave an interest	in.
0.00		
6. Do you own or have any legal or equitable interest in any farm- or commercial No. Gc to Part 7.	fishing-related property?	
Yes. Go to line 47.		
		Current value of the
		portion you own? Do not deduct secured claims
7. Farm animals		or exemptions
Examples: Livestock, poultry, farm-raised fish		
□ No		
Yes		
		\$

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48. Crops—elther growing or harvested ☐ No			
Yes. Give specific information			\$
49. Farm and fishing equipment, Implements, machinery, fixto	ures, and tools of trade		_
			\$
50. Farm and fishing supplies, chemicals, and feed No Yes			
			\$
51. Any farm- and commercial fishing-related property you did	d not already list		
Yes. Give specific information			
			\$
52. Add the dollar value of all of your entries from Part 6, inclifor Part 6. Write that number here	uding any entries for pag	ges you have attached	\$ <u>0.00</u>
Part 7: Describe All Property You Own or Have	e an Interest in Tha	at You Did Not List Above	
 53. Do you have other property of any kind you did not alread Examples: Season tickets, country club membership No Yes. Give specific information	y list?		
54. Add the dollar value of all of your entries from Part 7. Write Part 8: List the Totals of Each Part of this For		······	\$ <u>0.00</u>
55. Part 1: Total real estate, line 2			\$240,717.00
56. Part 2: Total vehicles, line 5	_{\$} 3,300.00	7	\$=,
57. Part 3: Total personal and household Items, line 15	\$ 3,350.00	·	
8. Part 4: Total financial assets, line 36	\$ 9,040.00	_	
9. Part 5: Total business-related property, line 45	\$ 0.00	_	
0. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00		
1. Part 7: Total other property not listed, line 54	+\$ ^{0.00}	_	
2. Total personal property. Add lines 56 through 61		Copy personal property total →	+\$ 15,690.00
3. Total of all property on Schedule A/B. Add line 55 + line 62			\$ 256,407.00

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Fill in this in	nformation to ide	ntify your case	
Debtor 1	Darlene Denise A	vila	
	First Name	Middle Name	Last Name
Debtor 2			_
(Spouse, if filling)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for	the: Central District of Califor	rnia
Case number			·,
(If known)	_	•	

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1. Which set of exemptions are you claiming You are claiming state and federal nonba You are claiming federal exemptions. 11	ankruptcy exemptions. 11 U.		
2. For any property you list on Schedule A/B	that you claim as exempt,	fill in the information below.	
Brief description of the property and line or Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
2521 1/2 Ganahl St Brief description: Line from	\$ <u>240,717.00</u>		Cal. Civ. Proc. Code § 704.730, 704.950
Schedule A/B: 1.1 2008 Nissan Altima Brief description: Line from	\$ 3,300.00	3,300.00 100% of fair market value, up to any applicable statutory limit	Cal. Civ. Proc. Code § 704.010
Schedule A/B: 3.1 Brief Household goods - 1 Bedroom Set, Couch drawers, Coffee Table, Dining Table with a description: Lamps, TV Stand, Bunk Bed, Refrigerator Schedule A/B: 6	n, 3 smali	2,500.00 100% of fair market value, up to any applicable statutory limit	Cal. Civ. Proc. Code § 704.020
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every : No Yes, Did you acquire the property covered No Yes	3 years after that for cases fil		

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Debtor

Darlene		Λ
Danene	Denise	AVIIA

Middle Name Lasi

Case number (if known)

	rief description of the property and line in Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief descrip	Electronics - TV, Cell Phone	\$ <u>200.00</u>	200.00	Cal. Civ. Proc. Code § 704.730, 704.950
Line fro	om ule A/B: 7		100% of fair market value, up to any applicable statutory limit	•
Brief descrip	Clothing - Clothes, Shoes, 3 Purses, Belts, Hats, Sweaters and Jackets	\$500.00	\$ 500.00	Cal. Civ. Proc. Code § 704.020
Line fro Schedu	ule A/B: 11		any applicable statutory limit	
Brief descrip		\$ <u>150.00</u>	150.00 \$ 150.00	Cal. Civ. Proc. Code § 704.040
Schedu Brief descrip	ule A/B; 12 Cash (Cash On Hand)	\$ 40.00	any applicable statutory limit	Cal. Civ. Proc. Code § 704.730, 704.950
Line fro	om	,	100% of fair market value, up to any applicable statutory limit)
Schedu Brief descrip	Wells Fargo Bank (Checking)	\$ <u>300.00</u>	_	Cal. Civ. Proc. Code § 704.730, 704.950
Line fro	ıle A/B; 17.1		any applicable statutory limit	
Brief descrip		\$ 8,700.00	8,700.00 \$ 8,700.00 100% of fair market value, up to	Cal. Civ. Proc. Code § 704.730, 704.950
Schedu			any applicable statutory limit	
Brief descrip	tion:	\$		
Line fro			100% of fair market value, up to any applicable statutory limit	
Brief descrip	tion:	\$	\$100% of fair market value, up to any applicable statutory limit	
Line fro			ану аррисаме зашиму ини	
Brief descrip	tion:	\$	\$100% of fair market value, up to	
Line fro Schedu			any applicable statutory limit	
Brief descript	tion:	\$ <u></u>	- - \$	
Line fro			100% of fair market value, up to any applicable statutory limit	
Brief descript	tion:	\$. \$100% of fair market value, up to	
Line fro Schedu			any applicable statutory limit	
Brief descript	tion:	\$	\$100% of fair market value, up to	
Line fro			any applicable statutory limit	

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Debtor 1 Description to identify your care and personal description of the identify your care and personal description of the identification of the ident	Name Last Name Strict of California		amend	if this is an led filing
Be as complete and accurate as possible information. If more space is needed, cop additional pages, write your name and can. 1. Do any creditors have claims secured by the complete in the c	by your property? In to the court with your other schedules. You have not	equally responsible , and attach it to thi	for supplying corrects form. On the top of	12/15 et fany
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Creditor's Name 2211 Old Earhart Road Number Street Suite 250 Ann Arbor MI 48105 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 07/01/2014	Describe the property that secures the claim: 2521 1/2 Ganahl St, Los Angeles, CA 90033 - \$481,4 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 7979		\$ 481,434.00	\$_0.00
Creditor's Name Number Street	Describe the property that secures the claim:	\$	\$	5
City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check If this claim relates to a community debt Date debt was incurred	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number			
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	\$ 365,296,27		

Ca	se 2:19-bk-20479-SK			/19 Entered 09/04/19 18:05:15 Desc Page 24 of 55
otor 1	Darlene Denise Avila First Name Middle Name	Last Name		Case number (if known)
ou have	List Others to Be Notified page only if you have others to be trying to collect from you for a de more than one creditor for any of d for any debts in Part 1, do not fill	notified abou	at your bankruptcy for	dy Listed or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, list the additional creditors here. If you do not have additional pers
				On which line in Part 1 did you enter the creditor?
Name		-		Last 4 digits of account number
Street				-
City		State	ZIP Code	
Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
Street		<u>-</u> .		-
City		State	ZIP Code	_
Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
Street				
City		State	ZIP Code	
lame			·	On which line in Part 1 did you enter the creditor? Last 4 digits of account number
Street				
ity		State	ZIP Code	
ame				On which line in Part 1 did you enter the creditor?
treet				
ihu				
ity		State	ZIP Code	On which line in Part 1 did you enter the creditor?

Name

Street

City

ZIP Code

State

Last 4 digits of account number

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Fill in this in	formation to id	entify your case:		
Debtor 1 Debtor 2 (Spouse, if filing)	Darlene Denise	Avlia		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States F	Bankruptcy Court f	or the: Central District of California		
Case number (If known)		·		

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Do any creditors have priority unsecured clair	ns against vou?			
☑ No. Go to Part 2. ☐ Yes.	,			
each claim listed, identify what type of claim it is nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page o	creditor has more than one priority unsecured claim, list to if a claim has both priority and nonpriority amounts, list to claims in alphabetical order according to the creditor's referenced than one creditor holds a particular claim instructions for this form in the instruction booklet.)	nat clairn here a name. If you hav	nd show both e more than t	priority and wo priority
(For an explanation of each type of stalling see that	instructions for this form in the instruction sockers	Total claim	Priority amount	Nonpriorit amount
	Last 4 digits of account number	\$	\$	_ \$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that appl	v.		
	Contingent	•		
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Deptor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Deptor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated			
ls the claim subject to offset? ☐ No ☐ Yes	Other. Specify			
- Manage J. 37776 .	Last 4 digits of account number	\$	<u> \$. </u>	\$
Priority Creditor's Name	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that appl	y.		
	Contingent			
City State ZIP Code	_ Unliquidated			
•	☐ Disputed			
Who incurred the debt? Check one. Debter 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were intoxicated			
☐ Check if this claim is for a community debt	Other. Specify			
is the claim subject to offset?				
Yes				

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Darlene Denise Avila Debtor 1 First Name Case number (If know List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one noncrioutly unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured CMRE Financial Services, Inc. 4.1 Total claim Last 4 digits of account number 4864 Noncriority Creditor's Name 3075 Imperial Hwy. \$ 1,597.00 When was the debt incurred? 01/02/2019 Number Suite 200 As of the date you file, the claim is: Check all that apply. Brea CA 92821-6753 City Contingent ZIP Code Who incurred the debt? Check one. Unliquidated Dabtor 1 only ☐ Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other, Specify V No Yes Capital One Bank U.S.A. NA Last 4 digits of account number 3482 Nonpriority Creditor's Name s 701.00 When was the debt incurred? POB 60599 06/30/2014 Number As of the date you file, the claim is: Check all that apply. City Of Industry CA ☐ Contingent 91716 Who incurred the debt? Check one.
Debtor 1 only State ☐ Unliquidated ZIP Code Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check If this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other. Specify ✓ No Comenity Bank/New York & Co. Last 4 digits of account number 2102 Nonpriority Creditor's Name When was the debt incurred? \$87.00 POB 182789 03/08/2014 Number As of the date you file, the claim is: Check all that apply. 43218-2789 Contingent Who incurred the debt? Check one. State Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other. Specify ✓ No __ Yes

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Darlene Denise Avila

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Debtor 1

	First Name Middle Name Last N	lame	Case number (if known)	
Pa	art 2: List All of Your NONPRIORITY U	nsecured Claim:	8	
3.	Do any creditors have nonpriority unsecured	d claims against vo	ou?	
	No. You have nothing to report in this part !			
	✓ Yes			
4	List all of your nonpriority unsecured claims	in the alphabetical	order of the creditor who holds each claim, if a creditor h	Te la sal de sa USC
	Tronprising unsecured claim list the Greator sen	iarar-iy ior each cial	m Full each claim is too identify what here as all and the Delice	
	claims fill out the Continuation Page of Part 2	ds a particular claim	list the other creditors in Part 3.If you have more than three r	compriority unsecured
	out the continuation rage of Part 2			
	1			Total claim
.4	Deardens		Last 4 digits of account number 0584	
	Nonpriority Creditor's Name		_ Last 4 digits of account number 0004	_{\$} 259.00
	700 S. Main St.,		When was the debt incurred? 09/01/2014	
	Number Street	· <u></u>	•	
			An of the determinant	
	Los Angeles CA	90014	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	
	Deptor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debt	s
	Is the claim subject to offset?		☑ Other, Specify	•
	No			
	Yes			
.5	FedLoan		0500	17.055.00
			Last 4 digits of account number 9FD0	\$ 17,055.00
	Nonpriority Creditor's Name PO Box 60610	 -	When was the debt incurred?	
	Number Street			
	Gleer Gleer		As of the date you file, the claim is: Check all that apply.	
	Harrishure	47100	Contingent	
	Harrisburg PA	17106 ZIP Code	Unliquidated	
	Who incurred the debt? Check one.	21/ 0008	☐ Disputed	
	Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		Obligations arising out of a separation agreement or divorce	
			that you did not report as priority claims	
	☐ Check If this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		✓ Other. Specify	
	₩ No			
1	Yes			
3	First Premiere Bank		Last 4 digits of account number 6203	
	Nonpriority Creditor's Name			\$ <u>569.00</u>
	3820 N. Louise Ave.,		When was the debt incurred? 12/05/2013	
	Number Street			
			As of the date you file, the claim is: Check all that apply.	
	Sioux Fails SD	57107		
	City State	ZIP Code	☐ Contingent☐ Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only		Disputed	
	Debtor 2 only			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans Obligations arising out of a separation agreement or diverse.	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		☑ Other. Specify	
	<u>✓</u> No			
	Yes			

Case 2:19-bk-20479-SK Doc 1 Filed 09/04/19 Entered 09/04/19 18:05:15 Page 28 of 55 Darlene Denise Avila Main Document Debtor 1 Middle Name List All of Your NONPRIORITY Unsecured Claims Part 2: 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nenpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identity what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3 If you have more than three nonpriority unsecured US Department of EDU AFSA Total claim Nonpriority Creditor's Name Last 4 digits of account number 9779 POB 7202 s 1,530.00 When was the debt incurred? Number 12/06/2009 As of the date you file, the claim is: Check all that apply. Utica 13504-7202 ZIP Code ☐ Contingent Who incurred the debt? Check one. ☐ Unliquidated Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other, Specify ✓ No Yes Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. ☐ Contingent □ Unliquidated Who incurred the debt? Check one. ZIP Code Debtor 1 only Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other, Specify No _ Yes Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. City
Who incurred the debt? Check one. ☐ Contingent ZIP Code ☐ Unliquidated Debtor 1 only ☐ Disputed Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts is the claim subject to offset? Other, Specify __ No Yes

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Debtor 1

Darlene Denise Avila

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First Name Middle Name

Last Name

Case number (if knowl)

List Others to Be	Notified About a	Debt That	You Already Listed
	List Others to Be	List Others to Be Notified About a	List Others to Be Notified About a Debt That

-	iave additional per	you for a debt you owe to someone else, list the original creditor in Parts 1 or ave more than one creditor for any of the debts that you listed in Parts 1 or 2, list the sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	1/2	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
· ·		Part 2: Creditors with Nonpriority Unsecured Clair
		Last 4 digits of account number
City State	ZIP Code	
Name		On which entry in Part 1 or Part 2 dld you list the original creditor?
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		Claims Claims Claims
City State	ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
		Claims Part 2: Creditors with Nonpriority Unsecured
City State	ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street		Claims Claims Claims
State State	ZIP Code	Last 4 digits of account number
ame		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street		Part 2: Creditors with Name in the
,	· · · · · · · · · · · · · · · · · · ·	
ty State	ZIP Code	Last 4 digits of account number
me		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
mber Street		Part 2: Creditors with Nonoricity Unassured
		Claims — Claims — Claims With Non-phonity Unsecured
State	ZIP Code	Last 4 digits of account number
ne		On which entry in Part 1 or Part 2 did you list the original creditor?
nber Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
		Claims Part 2: Creditors with Nonpriority Unsecured
		-idiffic

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Debtor 1

Darlene Denise Avila First Name Middle Name

Last Name

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e, Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6հ.	\$	0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	21,798.00
	6j. Total. Add lines 6f through 6i.	6j.	\$	21,798.00

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Fill in this in	nformation to ide	entify your case:	
Debtor	Darlene Denise Av	da	
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	or the Central District of Califon	nia
Case number (if known)			,,

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or compa	ny with whom you	have the contract or lease	s	State what the contract or lease is for
2.1					
	Name				
	Street		·	-	
	City	State	ZIP Code		
2.2					
	Name	-			
	Street				
	City	State	ZIP Code	_	
2,3					
	Name		-	_	
	Street		· <u>-</u>		
_	City	State	ZIP Code	_	
2,4					
	Name	-		_	
	Street			_	
L	City	State	ZIP Code		
2.5					
	Name	"	- " -		
	Street				
	City	State	ZIP Code	_	

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Fill in	this information to identify	your case			
	Darlene Denise Avila				
Debtor	1 First Name	Middle Name	Last Name	-	
Debtor	2			,	
(Spouse	, if filing) First Name	Middle Name	Last Name		
United	States Bankruptcy Court for the:	Central District of Califor	rnia		
Casen	ımher		62.00		
(If know			<u> </u>	Check if this	
				amended filir	ng
Offic	ial Form 106H				
	edule H: You	Codebtor	' e	12/	45
				ive. Be as complete and accurate as possible. If two married pe	_
and nur case nu	nber the entries in the boxember (if known). Answer eyou have any codebtors? (No Yes thin the last 8 years, have yona, California, Idaho, Louis No. Go to line 3. Yes. Did your spouse, formed No	es on the left. Attach very question. If you are filing a joint you lived in a commu- siana, Nevada, New Mer spouse, or legal eq	the Additional Page to case, do not list either sp unity property state or to Mexico, Puerto Rico, Texa uivalent live with you at th	erritory? (Community property states and territories include as, Washington, and Wisconsin.)	and
	Name of your spouse, former s	spouse, or legal equivalent	<u>.</u>		
	City	State	ZIP C	code	
3.1	own in line 2 again as a co	debtor only if that pe 6D), <i>Schedule E/F</i> (O	erson is a guarantor or c	codebtor if your spouse is filing with you. List the person cosigner. Make sure you have listed the creditor on Schedule G (Official Form 106G). Use Schedule D, Column 2 The creditor to whom you owe the de Check all schedules that apply Schedule D, line Schedule E/F, line	bt
	Street			Schedule G, line	
				<u> </u>	
	City	State	ZIP	^o Code	
3.2				Schedule D, line	
i -	Name		 :	Schedule E/F, line	
	Street			Schedule G, line	
	City	State	ZIP	Code	
3.3					
	Name		<u>,</u>	Schedule D, line	
				Schedule E/F, line	
	Street			Schedule G, line	

State

ZIP Code

	Main Doc	ument P	age :	33 o	f 55		
Fill in this information to identify	your case.						
Darlene Denise	Avila			П			
First Name Debtor 2	Middle Name	Last Name					
(Spouse, if filing) First Name	Middle Name	Las; Name		-			
United States Bankruptcy Court for the:	_Central District of Californi	a					
Case number (if known)					Check if 1		
	-				1	nended filing plement showing postpe	etition chapter 13
Official Form 106I					incom	e as of the following dat	te:
	Incomo				MM / I	DD / YYYY	
Schedule I: You Be as complete and accurate as pr						11 /	12/15
If you are separated and your spot separate sheet to this form. On the Part 1: Describe Employm	e top of any additional pag						
Fill in your employment information.		Debtor 1				Debtor 2 or non-filling	ig spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not employ	red			Employed Not employed	-
Include part-time, seasonal, or							
self-employed work. Occupation may include student	Occupation	_Shipping C					
or homemaker, if it applies.	Emplements seems	Safran Cab	in Inc				
	Employer's name						
	Employer's address	5701 Bolsa	Avent	ne		Number Street	
						Number Sueet	
		Huntington		ı, CA	92647		
	How long employed ther	City re? 3 vears	State	ZIP (Code	City S	tate ZIP Code
	riow long employed the	or o years		_			
Part 2: Give Details About	Monthly Income						
Estimate monthly income as of		. If you have noth	ing to re	port fo	or any line, w	rite \$0 in the space. Include	e your non-filing
spouse unless you are separated If you or your non-filing spouse he below. If you need more space, a	ave more than one employer		rmation	for al	l employers f	or that person on the lines	
Access to your more opened, a				For	Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sal deductions). If not paid monthly,			2.	\$_ 2	2,520.03	\$	
3. Estimate and list monthly over	time pay.		3. +	· \$	0.00	+ s	

4. Calculate gross income. Add line 2 + line 3,

2,520.03

Doc 1 Filed 09/04/19 Entered 09/04/19 18:05:15 Case 2:19-bk-20479-SK Main Document Page 34 moto 55 50000 Darlene Denise Avila For Debtor 2 or Last Name For Debtor 1 Middle Name First Name non-filing spouse 2,520.03 Copy line 4 here..... 5. List all payroll deductions: 440.18 5a. 5a. Tax, Medicare, and Social Security deductions 0.00 5b. 5b. Mandatory contributions for retirement plans 0.00 5c. 5c. Voluntary contributions for retirement plans 0.00 5d. 5d. Required repayments of retirement fund loans 159.73 5e. 0.00 5e. Insurance 5f. 5f. Domestic support obligations 0.00 59. 5g. Union dues 5h. 5h. Other deductions. Specify: ___ 599.91 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 1,920.12 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross 1,700.00 receipts, ordinary and necessary business expenses, and the total 00.0monthly net income. 8b. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent 0.00Include alimony, spousal support, child support, maintenance, divorce 80. settlement, and property settlement. 0.00 8d. 0.00 8d. Unemployment compensation 8e. 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 8f.

Specify:	8g. \$
8g. Pension or retirement income	8h. +\$
8h. Other monthly income. Specify:	9. \$ 1,700.00 \$
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	= \$ 3,620.12
10. Calculate monthly income. Add line 7 + line 9.	10. \$ 3,620.12 + \$ = \$
Add the entires in mile to the expenses that you list in S	Schedule J.
Add the entries if file to the state of the expenses that you list in S 11. State all other regular contributions to the expenses that you list in S Include contributions from an unmarried partner, members of your househ	old, your dependents, your roominates, and outside
Include contributions from an unmarried parties, making the friends or relatives.	at are not available to pay expenses listed in Schedule J.

0.00

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. friends or relatives. 11. + Specify: Parent's Contribution 12.

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

4,820.12 Combined monthly income

	Do you expect an increase or decrease within the year after you file this form? No.
13.	Do you expect an included of the
	No.

Yes. Explain:

Linible inform	nation to identify	your case:					
				Observativities	this is:		
abtor 1	rlene Denise Avila	Middle Name	Last Name	——— Check i			
	' Maure			\An a	mended filing		was chapter 13
ebtor 2 pouse, If filing) First	t Name	Middle Name	Last Name	L_A su	pplement showi enses as of the f	ng postpe	tition chapter 13
nited States Bank	kruptcy Court for the:	Central District of California	(State) (DD / YYYY	Ollowing	
ase number f known)			- 				
fficial Fo	rm 106J	_					12/15
chedu	ile J: Yo	ur Expens	<u>es</u>	the second second	IIv responsible fo	or supplyin	g correct
formation. If M	and accurate as p nore space is need wer every question	ueu, attacii univare	people are filing et to this form. (together, both are equa On the top of any additio	nal pages, write y	your name	and case number
art B D	escribe Your Ho	usehold					
Is this a joint							
No. Go to	line 2.	a senarate household?					
Committee of the Commit		a separate household?					
	10		Evnenses for Se	parate Household of Deb	or 2.		
	es. Debtor 2 must		Expended it.				- Januardont
Do you have	dependents?	✓ No		Dependent's relationship t	Dep age	endent's	Does dependent with you?
Do not list De		☐ Ves Fill out this	information for	Debtor 1 or Debtor 2			
Debtor 2.	,Dioi i and	each dependent					No Van
Do not state	the dependents'						Yes
names.	•				_		No
							Yes
							L. No
						_	Yes
							No
							Yes
							No
							Yes
		georg .					
3. Do your ex	penses include	No					
AVMOREDS (of neople other the	an 🗖 🗸					
expenses of yourself ar	of people other than nd your dependen	an Yes					
expenses of yourself ar	of people other the nd your dependent stimate Your Or	an hts? Yes ngoing Monthly Expe			cumplement in a	Chapter 13	case to report
expenses of yourself ar	of people other the nd your dependent stimate Your Or	an hts? Yes ngoing Monthly Expe		are using this form as a	supplement in a	Chapter 13	3 case to report orm and fill in the
expenses of yourself ar	of people other the nd your dependent stimate Your Or	an hts? Yes ngoing Monthly Expe		are using this form as a nental Schedule J, checl	supplement in a the box at the to	Chapter 13	3 case to report irm and fill in the
expenses of yourself ar Part 2: Estimate you expenses as	of people other the old your dependent stimate Your Or of a date after the	an tts? Yes ngoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the	date unless you this is a supplen		supplement in a the to	Chapter 13	3 case to report rm and fill in the
expenses of yourself are Part 2: Estimate you expenses as applicable date.	of people other the old your dependent stimate Your Or or expenses as of of a date after the ate.	an tts? Yes ngoing Monthly Expe your bankruptcy filing ce bankruptcy is filed. If t	date unless you this is a supplen tassistance if yo	ou know the value of	supplement in a the box at the to	Chapter 13 op of the fo Your ex	
Part 2: Estimate you expenses as applicable da include expe	of people other the nd your dependent stimate Your Or or expenses as of of a date after the ate. enses paid for with	an its? Yes Ingoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the hon-cash government is under it on Schedule is the its of the schedule is the interest of the schedule is the interest of the schedule is the interest of the schedule in the interest of the schedule is the interest of the schedule in the sc	date unless you this is a supplen t assistance if yo Your Income (Of	ou know the value of fficial Form 106l.)	i.e.		penses
Part 2: Estimate you expenses as applicable da include expe	of people other the nd your dependent stimate Your Or or expenses as of of a date after the ate. enses paid for with	an its? Yes Ingoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the hon-cash government is under it on Schedule is the its of the schedule is the interest of the schedule is the interest of the schedule is the interest of the schedule in the interest of the schedule is the interest of the schedule in the sc	date unless you this is a supplen t assistance if yo Your Income (Of	ou know the value of fficial Form 106l.)	i.e.		
expenses of yourself are Part 2: Estimate you expenses as applicable dalinclude expenses as applicable dassista	of people other the nd your dependent stimate Your Or ir expenses as of of a date after the ate. enses paid for with ance and have included	an its? Yes Ingoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the hone-cash government bluded it on Schedule I: Yeship expenses for your interest.	date unless you this is a supplen t assistance if yo Your Income (Of	ou know the value of	i.e.		penses
Part 2: Estimate you expenses as applicable da include expenses as the control of	of people other than d your dependent stimate Your Or or expenses as of a date after the ate. enses paid for with ance and have included or home owners for the ground or look of the ground or look	an its? Yes Ingoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the hone-cash government bluded it on Schedule I: Yeship expenses for your interest.	date unless you this is a supplen t assistance if yo Your Income (Of	ou know the value of fficial Form 106l.)	i.e.		penses
Part 2: E: Estimate you expenses as applicable da include expensuch assista 4. The renta any rent in the foot include	of people other the and your dependent stimate Your Or or expenses as of of a date after the ate. The senses paid for with ance and have included in line 4:	an its? Yes Ingoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the hone-cash government bluded it on Schedule I: Yeship expenses for your interest.	date unless you this is a supplen t assistance if yo Your Income (Of	ou know the value of fficial Form 106l.)	i.e.		2,477.84 . 0.00
Part 2: Estimate you expenses as applicable da include expenses to a such assista 4. The renta any rent if not include a Rea	of people other than d your dependent stimate Your Or or expenses as of of a date after the ate. Senses paid for with ance and have included in line 4: all estate taxes	an its? Yes Ingoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the hone-cash government bluded it on Schedule I: Yeship expenses for your lot.	date unless you this is a supplen t assistance if yo Your Income (Of	ou know the value of fficial Form 106l.)	s and 4.		2,477.84 0.00
expenses of yourself ar Part 2: Estimate you expenses as applicable da Include expesuch assista 4. The renta any rent if not include 4a. Rea 4b. Pro	stimate Your Or Ir expenses as of a date after the ate. In senses paid for with ance and have included in line 4: all estate taxes operty, homeowners for the ground or local estate taxes	an tts? Yes Ingoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the hon-cash government fluded it on Schedule is the ship expenses for your interest. Yes, or renter's insurance	date unless you this is a supplen t assistance if yo Your income (Of residence. Includ	ou know the value of fficial Form 106l.)	s and 4. 4a. 4b.		2,477.84 . 0.00
expenses of yourself ar Part 2: Estimate you expenses as applicable da Include expesuch assista 4. The renta any rent if not include 4a. Rea 4b. Pro	stimate Your Or Ir expenses as of a date after the ate. In senses paid for with ance and have included in line 4: all estate taxes operty, homeowners for the ground or local estate taxes	an its? Yes Ingoing Monthly Expe your bankruptcy filing of the bankruptcy is filed. If the hone-cash government bluded it on Schedule I: Yeship expenses for your interest.	date unless you this is a supplen t assistance if yo Your income (Of residence. Includ	ou know the value of fficial Form 106l.)	s and 4. 4a.		2,477.84 0.00

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Debtor 1 Darlene Denise Avila Case number (# known).

			Your ex	kpenses
5.	Additional mortgage payments for your residence, such as nome equity loans	5 .	\$	0.00
6.	Utilitles:			
	6a. Electricity, heat, natural gas	6a,	\$	110.00
	6b. Water, sewer, garbage collection	6b.	\$	125.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	225.00
	6d. Other, Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7 .	\$	240.00
8.	Childcare and children's education costs	8.	\$	0.00
9,	Clothing, laundry, and dry cleaning	9.	\$	
10.	Personal care products and services	10.	\$	90.00
11.	Medical and dental expenses	11.	_	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	240.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15,	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	300.00
	15d. Other insurance, Specify:	15d.	\$	0,00
16,	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			-
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00_

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Deptor 1	Darlene D	enise Avila Middle Name	Last Name		Case nu	ımber (# known)		
	rijst vajne	Middle Name	Last Mame					
. Othe	er. Specify:						. + \$	0.00
-							+\$	
							+\$	
. Calc	ulate your mo	nthly expenses.						
22a.	Add lines 4 thro	ugh 21.				22a	· \$	3,887.84
22b.	Copy line 22 (m	nonthly expenses	for Debtor 2), if an	ıy, from Official For	m 106J-2 22c. Add lin	e 22a 22b	· \$	
and 2	22b. The result i	is your monthly ex	penses.			22c	· \$	3,887.84
	-	hly net income.					\$	4,820.12
			nthly income) from			23 a	-	0.007.04
23b.	Copy your mon	ithly expenses fro	n line 22c above.			23b	-\$	3,887.84
	-		from your monthly	y income.			\$	932.28
	The result is yo	ur monthly net ind	ome.			230		
Dovo	u expect an in	crease or decrea	se in vour exnen	nses within the ve	ar after you file this t	form?		
_	-			•	r or do you expect you			
					terms of your mortga			
No No								
Ye	s. Explain h	iere:						

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Fill in this int	nformation to identify your case:				
Debtor 1	Darlene Denise Avila				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B Case number (If known)	Bankruptcy Court fo	r the Central District of California			

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NO	Γ an attorney to help you fill out bankruptcy forms?
☑ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Under penalty of perjury, I declare that I have reacthat they are true and correct.	d the summary and schedules filed with this declaration and
* Dalu (=	*
Signature of Debtor 1	Signature of Debtor 2
Date 09/04/2019 MM / DD / YYYY	Date

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Fill in t	his information to iden	tify your case		
Debtor :	Darlene Denise A	vila Middle Name	Last Name	_ [
Debtor 2	2	Middle Name	Last Name	-
	if filing) First Name States Bankruntov Court for	the: Central District of Califo		
		ine. Certifal District of Califo	rina	
Case nu (if know				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1. What Is your Married Not marr	r current marital ied	status?				
✓ No		you lived anywhere o				
Debtor	r1#:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
Numbe	or Street		From To	Same as Debtor 1 Number Street		Same as Debtor 1 From To
City		State ZIP Code		City Same as Debtor 1	State ZIP Code	Same as Debtor 1
Numbe	er Street		From	Number Street		From
City	<u> </u>	State ZIP Code		City	State ZIP Code	
and territorie	es include Arizona	rou ever live with a sp , California, Idaho, Lou t Schedule H: Your Co	uisiana, Nevada, Nev	valent In a community propert w Mexico, Puerto Rico, Texas, v m 106H).	y state or territory? (C Washington, and Wisco	Community pro per ty state: nsin.)

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btor 1	Darlene Denise Avila			Case n	umber (if known)	
	First Name Middle Name	Last Name				
art 2:	Explain the Sources of	Your Income				
Fill in	ou have any income from em the total amount of income you are filing a joint case and you	u received from all jobs	and all busin	esses, including part-ti	ime activities.	dar years?
□ N ☑ Y	c es. Fill in the details.					
	es. Fill fill the details.				Dalukan B	
		Debtor 1			Debtor 2	
		Sources of Check all that		Gross income (before deductions and exclusions)	Sources of income Check all that apply	Gross income (before deductions and exclusions)
	From January 1 of current ye the date you filed for bankru	ar until	commissions, s, tips ng a business	\$ <u>22,622.32</u>	☐ Wages, commissions, bonuses, tips ☐ Operating a business	\$
1	For last calendar year:		commissions,	\$29,218.00	Wages, commissions, bonuses, tips	\$ -
((January 1 to December 31, 20	018	ng a business	<u></u>	Operating a business	
	For the calendar year before	bonuse:	, commissions, s, tips	\$ 27,420.00	Wages, commissions, bonuses, tips	\$
•	(January 1 to December 31, 20	017)	ng a business		Operating a business	=
Ø N		ome from each source s	separately. Do	o not include income th	at you listed in line 4.	
LI: Y	es. Fill in the details.	Dahen 1			Deptor 2	
		Debtor 1				
		Sources of income Describe below	each so	deductions and	Sources of Income Describe below	Gross income from each source (before deductions and exclusions)
rom la	nuary 1 of current		\$			\$
ear unt	il the date you		\$			\$
ed for	bankruptcy:		\$			\$
ve lact e	calendar year:		\$			\$
anuary	•		\$			\$
-	er 31,) —		\$			\$
42			•			\$
	calendar year		\$			\$
efore th			\$			\$
lanuary		·	Ψ			
	er 31)					

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Darlene Denise Avila Debtor 1 Case number (# known)_ Middle Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes, ☑ No Yes. Fill in the details. Nature of the case Court or agency Status of the case Case title: Pending Court Name On appeal Number Concluded Case number ZIP Code Pending Court Name Case title: On appeal Concluded Number Street State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. City Property was attached, seized, or levied. State ZIP Code Describe the property Value of the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. City ZIP Code Property was attached, seized, or levied.

Case 2:19-bk-20479-SK Doc 1 Filed 09/04/19 Entered 09/04/19 18:05:15 Main Document Page 42 of 55 Darlene Denise Avila Debtor 1 Case number (#known)_ First Name Middle Nam: Last Name 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? ✓ No Yes, Fill in the details. Describe the action the creditor took Date action was taken Creditor's Name Number Street State ZIP Code Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☑ No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person Value the gifts Person to Whom You Gave the Gift Number Street City State ZIP Code Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person Value the gifts Person to Whom You Gave the Gift Number Street State ZIP Code Person's relationship to you

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1	First Name Middle Name La	ast Name Case number (if known)		
fithin	2 years hafara you filed for hankey	ptcy, did you give any gifts or contributions with a total valu		
 Z No		picy, did you give any girts or contributions with a total valu	e of more than \$60	to any charity?
	, s. Fill in the details for each gift or co	ntribution.		
	ifts or contributions to charities at total more than \$600	Describe what you contributed	Date you contributed	Value
				¢
Cha	rity's Name			Ψ
_		_		\$
Num	nber Street	-		
Cit	State ZIP Code			
6:	List Certain Losses			
		· · · · · · · · · · · · · · · · · · ·		
	escribe the property you lost and how e loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on time 33 of Schedule A.B. Property	Date of your loss	Value of property lost
				\$
				Ψ
7:	List Certain Payments or Tran	sfers		
		tcy, did you or anyone else acting on your behalf pay or trans	sfer any property to	anyone you
	ted about seeking bankruptcy or pr any attorneys, bankruptcy petition pre	reparing a bankruptcy petition? eparers, or credit counseling agencies for services required in yo	ur bankruntov	
No			or bankruptcy.	
	. Fill in the details.			
		Description and value of any property transferred	Date payment or	Amount of paymer
Cy	ynthia Grande scn Who Was Paid		transfer was made	Tanoant of paymen
	str who was Pald 312 Sepulveda Blvd. Suite 220			
Nun	mber Street		09/04/2019	\$ 1,000.00
	*n **			
To	rrance CA 90505			\$
City				
_	-21			
Ema	ail or website address			
Pers	son Who Made the Payment, If Not You			

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	First Name Middle Name La	ast Name	Case number (# known)	
		Description and value of any propert	y transferred Date payment or transfer was made	Amount of payment
Fe	erson Who Was Paid	-		
			-	\$
N	umber Street	-		
_		-	·	\$
<u></u>	ity State ZIP Code	. K		
O,	state ZIF Code			
En	mail or website address	_		
_				
Pa	erson Who Made the Payment, if Not You			
Ν¢	i include any payment or transfer that y s. s. Fill in the details.			
		Description and value of any property	transferred Date payment or transfer was made	Amount of paym
Pe	erson Who Was Paid	10		
Nu	umber Street	e0		\$
_		-		\$
Cit	ity State ZIP Code	•		
hin :	2 years before you filed for bankrup	otcy, did you sell, trade, or otherwise	transfer any property to anyone, other than	property
n sfe ude	erred in the ordinary course of your both outright transfers and transfers a	business or financial affairs?	of a security interest or mortgage on your prop	ortu)
not i	include gifts and transfers that you ha	ve already listed on this statement.	or a second, interest of mortgage of your prop	erty).
Νo	s. Fill in the details.			
Yes				
Yes		Description and value of property	Describe any property of narrowste recovered	Finto transfer
Yes		Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
	rson Who Received Transfer		Describe any property or payments received or debts paid in exchange	
Per	rson Who Received Transfer		Describe any property or payments received or debts paid in exchange	
Per			Describe any property or payments received or debts paid in exchange	
Per	mber Street		Describe any property or payments received or debts paid in exchange	
Per Nur City	mber Street		Describe any property or payments received or debts paid in exchange	
Nur City Per	y State ZIP Code		Describe any property of payments received or debts paid in exchange	
Nur City Per	State ZIP Code srson's relationship to you son Who Received Transfer		Describe any property or payments received or debts paid in exchange	
Per Per	y State ZIP Code		Describe any property or payments received or debts paid in exchange	
Per Per	State ZIP Code srson's relationship to you son Who Received Transfer		Describe any property or payments received or debts paid in exchange	

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	First Name Middle Name La	st Name	Case number (if kno) 	
	**				
are a b	10 years before you filed for bankr peneficiary? (These are often called a s. Fill in the details.	uptcy, did you transfer any proper asset-protection devices.)	ly to a self-settled trust	or similar device of wi	nich you
	s. This is a decided.	Description and value of the prope	erty transferred		Date transfer was made
Nan	me of trust				
	List Certain Financial Accoun				
losed nclude proker:	1 year before you filed for bankrup l, sold, moved, or transferred? e checking, savings, money market age houses, pension funds, coope	, or other financial accounts; certi	ficates of deposit; shar		
_ 140	s. Fill in the details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Na	me of Financial Institution	xxxx	Checking		\$
Nu	mber Street		Savings		
_		ā	Money market		
City	ty State ZIP Code	ē	Money market Brokerage Other		
	y State ZIP Code	xxxx	Brokerage Other Checking	 0	\$
Nar		xxxx	Brokerage Other Checking Savings Money market	>=====1)	\$
Nar	me of Financial Institution imber Street	XXXX	Brokerage Other Checking Savings	S	\$
Nar Nur City Oo you ecuriti	me of Financial Institution mber Street y State ZIP Code now have, or did you have within 1 ies, cash, or other valuables?		Checking Savings Money market Brokerage Other	ox or other depository t	\$ for
Naz Nuz City Oo you ecuriti	me of Financial Institution mber Street y State ZIP Code now have, or did you have within 1		Checking Savings Money market Brokerage Other		
Nur City Oo you securiti No Yes	me of Financial Institution mber Street y State ZIP Code now have, or did you have within 1 ies, cash, or other valuables?	year before you filed for bankrup	Brokerage Other Checking Savings Money market Brokerage Other cy, any safe deposit bo		Do you stil
Nan Num City Oo you securiti No 1 Yes	me of Financial Institution mber Street Y State ZIP Code now have, or did you have within 1 ies, cash, or other valuables? 5. Fill in the details.	year before you filed for bankrup Who else had access to it?	Brokerage Other Checking Savings Money market Brokerage Other cy, any safe deposit bo		Do you sti have it?

ZIP Code

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Debtor 1	Darlene Denise Avila First Name Middle Name i	ast Name	Case number (if known)	
Ľ r	No	it or place other than your home wi	ithin 1 year before you filed for bankruptcy?	
u 1	es. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you still have it?
				□No
	Name of Storage Facility	Name		Yes
	Number Street	Number Street		
		City State ZIP Code		
	City State ZIP Code	.		
Part 9	Identify Property You Hole	d or Control for Someone Else	1	
or h	old in trust for someone.	someone else owns? Include any	property you borrowed from, are storing for,	
		Where is the property?	Describe the property	Value
	Owner's Name	e.		s
	Number Street	Number Street		
		U	 !	
	City State ZIP Code	. City State 2	IP Code	
Part 1	Give Details About Environ	nmental Information		
For the	purpose of Part 10, the following def	finitions apply:	-	<u> </u>
haza	<i>ironmental law</i> means any federal, st ardous or toxic substances, wastes, a ading statutes or regulations controll	or material into the air, land, soil, s	oncerning pollution, contamination, releases urface water, groundwater, or other medium	i o f
■ Site	means any location, facility, or prope	erty as defined under any environm	es, wastes, or material. iental law, whether you now own, operate, o	r utilize
	used to own, operate, or utilize it, inc	• .	andono maste le	
	aroous <i>materiai</i> means anything an e stance, hazardous materia!, pollutant		ardous waste, hazardous substance, toxic	
Report	all notices, releases, and proceeding	s that you know about, regardless	of when they occurred.	
24. Has	any governmental unit notified you th	nat you may be liable or potentially	liable under or in violation of an environmen	tal law?
	lo /es. Fill in the details.			
	•	Governmental unit	Environmental law, if you know it	Date of notice
4	lame of site	Governmental unit		=======================================
N	umber Street	Number Street		
-		City State ZIP Code		
<u> </u>	city State ZIP Code			

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Darlene Denise Avila First Name Middle Name	Last Name	Case number (if known)	
P∥St N4Me Mixide Name	rasi (ARILIA		
ave vou notified any governmenta	l unit of any release of hazardous m	aterial?	
_			
☑ No			
Yes. Fill In the details.		_ 0 0 . 0	43
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
10110 01 0120	GO VOTIMIONICAL CHILL		
Number Street	Number Street		
	City State ZIP Co	ode	
			
City State ZP	Code		
iava vou baan a party in any ludicis	l or administrative proceeding unde	er any environmental law? Include settlements	s and orders
	of damming and proceeding and	, any on the month of the month	, and ordered
☑ No			
Yes. Fill in the details.			Status of the
	Court or agency	Nature of the case	case
Case title			
	Court Name		☐ Pending
			On appea
	Number Street		☐ Conclude
			_
Case number	City State	ZIP Code	
A sole proprietor or self-emp		or have any of the following connections to a er activity, either full-time or part-time partnership (LLP)	ny business?
	ging executive of a corporation		
<u> </u>	he voting or equity securities of a co	progration	
_	-		
No. None of the above applies.			
Yes. Check all that apply above	and fill in the details below for each		
	Describe the nature of the bu		number Security number or ITIN
Business Name		Do not menue outlat o	receiving number of 11 III
		EIN: ~	
Number Street			
		Dates business existed	
	Name of accountant or book		T.,
		From	То
City State ZIP	Code	11 000	
	Describe the nature of the bu		number Security number or ITIN
Business Name		Do not include Social S	recality number of H IN
		EIN: -	
Number Street			
		Dates business existed	
	Name of accountant or book	keepei	
		From	То
City State ZIP	Code		

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Debtor 1	Darlene Denise Avila	
Debtor 2 (Spouse, if filing)	Middle Name	Last Name
	Middle Name Bankruptcy Court for the: Central District of California	Last Name
ase number f known)	District of California	

(Check as directed	in	F			
		m	iines	17	and	2

According to the calculations required by this Statement:

- 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- 3. The commitment period is 3 years.
- 4. The commitment period is 5 years.
- Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1# Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31 If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space

I .					
Your gross wages, salary, tips, bonuses, overting payroll deductions). Alimony and the salary tips are the salary tips.	ne, and commis	sions (befor	u oli	Column A Debtor 1	Column 3 Debtor 2 or non-filing spouse
Column B is filled in.	Ide payments fro	· · ·		\$2,520.03	\$ <u>0.00</u>
you or your dependents, including child support. an unmarried partner, members of your household, your not include regular contributions from a spound. be not include payments you listed on line 3.	paid for house Include regular our dependents, use only if Colum	hold expens	22.00	\$0.00	\$0.00
 Net income from operating a business, profession farm 				\$0.00	\$0.00
Gross receipts (before all deductions) Ordinary and necessary operating expenses	\$0.00	\$0.00			
Net monthly income from a business, profession, or fan	-\$ <u>0.00</u>	- \$ <u>0.00</u>			
Net income from rental and other real provides	\$ <u>0.00</u>	\$0.00	Copy here	\$ <u>0.00</u>	\$ <u>0.0</u> 0
1.333 receipts (before all deductions)	Debtor 1	Debtor 2		· · · · · · · · · · · · · · · · · · ·	+ 4.00
Ordinary and necessary operating expenses	\$0.00	\$0.00			
Net monthly income from rental or other real property	-\$ <u>0.00</u>	-\$ <u>0.00</u>			
	\$ <u>0.00</u>	\$ <u>0.00</u>	Copy here→	\$ <u>0.00</u>	* 0.00
cial Form 122C-1 Chapter to a					\$ <u>0.00</u>

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Debtor 1 Darlene Denise Avila First Name Middle Name Last Name	Case number (il known}	
	Column A Debtor 1	Column B Debtor 2 or non-filing spous	ie.
7. Interest, dividends, and royalties	\$ <u>0.00</u>	_ \$0.00	
8. Unemployment compensation	\$0.00	\$0.00	-
Do not enter the amount if you contend that the amount received was a benefit unde the Social Security Act. Instead, list it here:	r		-
For you\$ 0.00			
For your spouse \$ 0.00			
 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 	\$ <u>0.00</u>	_ \$ 0.00	(4)
0. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.		- Y	
10a.	\$_0.00	\$ 0.00	
10b,	\$ 0.00	· 	•
10c. Total amounts from separate pages, if any.		\$ <u>0.00</u>	
·	+\$0.00	+ \$ 0.00	
Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$2,520.03	1.000	
To the total for Column B.	\$ 2,020.03	+ \$0.00	= _{\$} 2,520
art 2 Determine How to Measure Your Deductions from Income	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Total aven
to measure your beductions from income			monthly in
Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:			monthly Ir
Copy your total average monthly income from line 11.			monthly le
Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d.			monthly li
Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you.			monthly li
Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's syour dependents.	paid for the househ	old expenses of you other than you or	monthly Ir
Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11. Column R. the work of the income listed in line 11.	paid for the househ	old expenses of you other than you or	monthly li
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Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's s your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d.	paid for the househ	old expenses of you other than you or	monthly le
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Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's s your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d.	paid for the househ upport of someone of e devoted to each po \$ \$	old expenses of you other than you or urpose. If	monthly in
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Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's s your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total	paid for the househ upport of someone of edevoted to each position of the second secon	old expenses of you other than you or urpose. If	\$ 2,520.03
Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's s your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total	paid for the househ upport of someone of edevoted to each position of the second secon	old expenses of you other than you or urpose. If Copy here, 13d.	\$ 2,520.03
Calculate the marital adjustment. Check one: You are not married. Fill in 0 in line 13d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly or your dependents, such as payment of the spouse's tax liability or the spouse's s your dependents. In lines 13a-c, specify the basis for excluding this income and the amount of income necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total	paid for the househ upport of someone of edevoted to each position of the second secon	old expenses of you other than you or urpose. If Copy here, 13d.	\$ 2,520.00

15b. The result is your current monthly income for the year for this part of the form.

x 12

\$30,240.36

Case 2:19-bk-20479-SK Doc 1 Filed 09/04/19 Entered 09/04/19 18:05:15 Page 50 of 55 Main Document Darlene Denise Avila Debtor 1 Case number (if kno 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. CA 16b. Fill in the number of people in your household. 3 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. \$84,003.00 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) 18. Copy your total average monthly income from line 11. 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend \$<u>2,520.03</u> that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's If the marital adjustment does not apply, fill in 0 on line 19a. \$0.00 Subtract line 19a from line 18. 19a. \$2,520.03 19h 20. Calculate your current monthly income for the year. Follow these steps: 20a. Copy line 19b. Multiply by 12 (the number of months in a year). <u>\$2,520.03</u> 20b. The result is your current monthly income for the year for this part of the form. 12 20b \$30,240.36 20c. Copy the median family income for your state and size of household from line 16c. \$ 84,003.00 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below Ander penalty of perjury I declare that the information on this statement and in any attachments is true and correct. By signing here. Signature of Debtor 1 Signature of Debtor 2 09/04/2019 MM/DD /YYYY MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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United States Bankruptcy Court

Central District of Califo	ornia
In re Darlene Denise Avila	
	Case No.
Debtor	Chapter 13
DISCLOSURE OF COMPENSATION OF A	TTORNEY FOR DEBTOR
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b above named debtor(s) and that compensation paid to me petition in bankruptcy, or agreed to be paid to me, for serv the debtor(s) in contemplation of or in connection with the	within one year before the filing of the
FLAT FEE	
For legal services, I have agreed to accept.	\$ 5,000.00
Prior to the filing of this statement I have received	1,000.00
Balance Due.	\$ 4,000.00
RETAINER	
For legal services, I have agreed to accept a retainer of	her\$
The undersigned shall bill against the retainer at an hourly r	ate of \$
[Or attach firm hourly rate schedule.] Debtor(s) have agreed approved fees and expenses exceeding the amount of the ret	to nove all Count
2. The source of the compensation paid to me was:	
Debtor Other (specify)	
3. The source of compensation to be paid to me is:	
Debtor Other (specify)	
4. I have not agreed to share the above-disclosed compensare members and associates of my law firm.	sation with any other person unless they
I have agreed to share the above-disclosed compensation are not members or associates of my law firm. A copy of the Agree of the people sharing the compensation is attached.	on with a other person or persons who eement, together with a list of the names
In return of the above-disclosed fee, I have agreed to render le bankruptcy case, including:	egal service for all aspects of the
 a. Analysis of the debtor's financial situation, and rendering whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement required; c. Representation of the debtor at the meeting of creditors and adjourned bearing of the second s	ts of affairs and plan which may be
adjourned hearings thereof;	confirmation hearing, and any

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d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERT	IFICA	TION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

09/04/2019

Date

Signature of Attorney

Cynthia Grande Law Firm

Name of law firm 220

Torrance, CA 90505 3107132334

info@thegrandelawfirm.com

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Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address Cynthia Grande	FOR COURT USE ONLY
3812 Sepulveda Blvd. 220	
Torrance, CA 90505	
3107132334	
3109336981	
266549	
info@thegrandelawfirm.com	
ano waregrandelawiirm.com	
Debtor(s) appearing without attorney	
Attorney for Debtor	
CENTRAL DISTRICT OF CA	BANKRUPTCY COURT ALIFORNIA - LOS ANGELES DIVISION
In re:	CASE NO.:
	CHAPTER: 13
	VERIFICATION OF MASTER
	MAILING LIST OF CREDITORS
	[LBR 1007-1(a)]
Dales	
Debtor(s).	
ursuant to LBR 1007-1(a), the Debtor, or the Debter analty of perjury that the master mailing list of credes sheet(s) is complete, correct, and consistent wis sponsibility for errors and omissions.	tor's attorney if applicable, certifies under ditors filed in this bankruptcy case, consisting of the the Debtor's schedules and I/we assume all
ate: 09/04/2019	
	Name U
8	Signature of Debtor 1
te:09/04/2019	
	•
S	Signature of Debtor 2 (joint debtor) (if applicable)
te: 09/04/2019	W// (ii applicable)
S	ignature of Attorney for Debtor (if applicable)

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Total Control

CMRE Financial Services, Inc. 3075 Imperial Hwy. Suite 200 Brea, CA 92821-6753

Capital One Bank U.S.A. NA POB 60599 City Of Industry, CA 91716

Comenity Bank/New York & Co. POB 182789

Deardens 700 S. Main St., Los Angeles, CA 90014

FedLoan PO Box 60610 Harrisburg, PA 17106

First Premiere Bank 3820 N. Louise Ave., Sioux Falls, SD 57107

Home Point Financial 2211 Old Earhart Road Suite 250 Ann Arbor, MI 48105

US Department of EDU AFSA POB 7202 Utica, NY 13504-7202